

POSITION	ID NO.	DATE
CLASSIFIER		8 3-18-93
EXAMINER	11	3-20-93
TYPIST	SPR	3-22-93
VERIFIER	338	3-23
CORPS CORR.		
SPEC. HAND		
FILE MAINT.		
DRAFTING		

INDEX OF CLAIMS

Claim	Date
Final 1	Original 9/14/93
2	✓
3	✓
4	✓
5	✓
6	N
7	✓
8	✓
9	✓
10	✓
11	✓
12	✓
13	✓
14	✓
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SYMBOLS

- ✓ Rejected
- = Allowed
- (Through number) Canceled
- + Restricted
- N Non-elected
- I Interference
- A Appeal
- O Objected

Claim	Date
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